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File with: lowa Ethics and Campeign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, towa 50319 Fax: 515-281-4073



2008 NOV 17 AM 7: 49

## FOR INSTRUCTIONS, SEE BACK OF FORM

PBX: 515-281-4073 DISCLO	SURE SUMMARY PAGE			
COMMITTEE NAME (Must be some as on Statem		FORM DR-2 DISCLOSURE		
MPORTANT: Indicate by # type of committee you are re (1) Statewide/Legislative/Judge Standing for Retention ( (4) County Central Committee (5) County Candidate (6) Subdivision Cendidate (8) County PAC (9) City PAC (11) Local Bellot Issue	porting for:	(Rev. 07/2007) DISCLOSURE REPORT For Office Use Only Comm. #		
CANDIDATE COMMITTEES ONLY: Candidate Name  Sackie Thomsen  Office Sought  Schale Vistrict 28	Political Party (if applicable)  Concernt  District (if Senate or House)  28	Logged In Scenned WKS WKS Computer Audited 12-17-08		
ale reports are subject to possible civil and criminal p	TELEPHONE	and 68A 401(3), the candidate, for a                            DATE SIGNED		
AM FILING A //- /9- O8 (report date)	- 19 - 09 REPORT FOR (1) ELECTION /(2)	NON-ELECTION YEAR.		
CHECK IF AMENDMENT TO REPORT DATED	Loca	al Committees, enter Date of Election		
STATEMENT OF CASH ( ASH ON HAND at the beginning of the reporting committee. This amount MUST be the se		Ø (DQ 00		
or the last reporting pends or must be zer	O IT IT IS IS BIST POPORT NIECL.)	5 0 0		
ADO TOTAL MONEY TAKEN IN THIS P		1/60 20		
•	h Schedule F)			
, ,	operty (Attach Schedule H)	<u> </u>		
(Schadule H applies to Candid	SUB-TOTAL			
SUBTRACT TOTAL MONEY SPENT TH				
Schedule B: Expenditures total (Attach S	chedule B) (**also see debts and loans below)			
· · · · · · · · · · · · · · · · · · ·	ach Schedule F)			
ASH ON HAND at the end of this reporting period	i (if final report balance must be zero)	\$		
UNPAID BILLS (From Schedule D - Attach Sche	dule D)	s 6		
	uttach Schedule E)	7		
OUTSTANDING LOANS (From Schedule F - Att	ach Schedule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Attack	hed?)	YES _K_NO		
CANDIDATE COMMITTEES ONLY:		ð		
ALUE OF CAMPAIGN PROPERTY (From Scheo	•	\$		
STATE COMMITTEES: Submit a reconciled came	eign account bank statement in January of each ve	ler.		

CONTRIBUTIONS — MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN CISCUOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11-5-08	CK# 4994	Steve Vary 51520 1914 Q Aire Arianta		\$ 50.00	
	1D#	Dang Sturell 1448 Toleso kue Dunlap IA 51529	·	50.00	
1/-6-08	CK# CG54	Landy Barry 51579 3191 200 St Woodbin It		10000	
1-6-08 1-6-08	CK#Visa	Told Heistand 610 walker St Woodbine TA 57579		965.70	
	ID# CK#				
	ID# CK#		·		
	<u> L</u>		SUB-TOTAL	\$//65.70	1

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

TOTAL (If last page of this schedule)

90,00

FOR INSTRUCTIONS, SEE BACK OF FORM

ETHICS & CAMPAIGN DISCLOSURE BOARD.

	<b>FERMI</b>	T. F	
<b>133</b>	Tagarda (i)	anderson	==

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES

**CHECK THIS BOX IF** AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT** 

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE

PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA

Nomsen CANDIDATE NAME AND ADDRESS TO WHOM PURPOSE AMOUNT DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED (if applicable) AND PAC EXPENDED (Disbursement) WAS MADE (MM/DD/YR) CHECK NUMBER Connail Blush CK#B.lled CK# CK# Visq 720 Louis Hue Onnintes ID# CK# ID# CK# ID# CK# ID# CK#

TOTAL (if last page of this schedule)

SUB-TOTAL

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 68A.402(3)(I).)